JURNAL EDUSCIENCE (JES)
p-ISSN : 2303 - 355X | e-ISSN : 2685 - 2217
PUBLISHED BY : LPPM of UNIVERSITAS LABUHANBATU

Assessing Quality in a University-Based Child-Minding Facility: Toward an Evidence-Based Indicators Framework

Ronald Macanip Quileste[1]

[1]School of Education, Xavier University - Ateneo de Cagayan, Philippines
*Email: rquileste@xu.edu.ph

ARTICLE INFO

Keywords:
University-based Child-Minding Facility
Early Childhood Quality
Mixed methods
Child Voice
Quality Indicators Framework

ABSTRACT

Purpose – University-based child-minding facilities serve as care spaces, developmental support settings, family support services, and teacher education sites, yet quality indicators for these hybrid environments remain underdeveloped. This study develops an evidence-informed framework of quality indicators for university-based child-minding facilities, using the Little Iggy Center as an empirical case.

Methodology – The study used a records-based convergent mixed-methods design. Quantitative data included stakeholder satisfaction surveys from 11 parent-clients, 12 School of Education student-users, and 3 instructor-users, as well as paired developmental checklist records from 11 children. Qualitative data included 11 child interview records and 1 event-based anecdotal record. Descriptive analysis, thematic analysis, and mixed-methods integration were used.

Findings – High stakeholder satisfaction, with the strongest ratings from parent-clients and student-users. Paired checklist records showed positive developmental patterns across domains, increasing from M = 2.39 to M = 4.12. Child interviews and anecdotal documentation revealed themes of play-rich engagement, relational care, emotional security, peer connection, developing independence, and emergent learning. Mixed-methods integration showed convergence across safe and responsive care, developmental support, belonging, family trust, and institutional usefulness, while identifying areas for improvement in facility maintenance, resources, routine visibility, transition safety, and curricular coordination.

Contribution – The study offers evidence-based guidance for assessing and improving university-based child-minding facilities in higher education contexts, particularly where centers serve children, families, preservice teachers, and institutional welfare goals simultaneously within local university care-learning systems.

Received 29 June 2026; Received in revised form 18 September 2026; Accepted 12 October 2026
Jurnal Eduscience (JES) Volume 13 No. 4 (2026)
Available online 30 August 2026

INTRODUCTION

University-based child-minding facilities occupy a distinct but insufficiently theorized position within early childhood care and education (ECEC). Unlike conventional daycare centers, preschools, kindergarten classrooms, or laboratory schools, these facilities often function simultaneously as care spaces for children, family-support services for university employees, institutional welfare initiatives, and possible teacher education sites. Their hybrid character complicates quality assessment, as quality cannot be judged solely by structural features such as facilities, staffing, schedules, or administrative compliance. It also requires attention to children's daily experiences, family trust, developmental participation, adult-child relationships, institutional usefulness, and opportunities for learning through play and routines.

Quality in ECEC has long been associated with both structural and process dimensions. Structural quality refers to relatively stable features of provision, such as facilities, staff qualifications, materials, ratios, schedules, and safety arrangements, while process quality concerns the everyday interactions, emotional climate, participation, and learning experiences that children encounter in care-learning environments (Burchinal, 2018; Ishimine & Tayler, 2014; OECD, 2021). Recent scholarship has further emphasized that ECEC quality is multidimensional, relational, and context-sensitive rather than reducible to a single universal checklist (Ha et al., 2025; Sağlam et al., 2023). This is especially important for child-minding facilities because their purpose extends beyond custodial care. In university-linked settings, quality may also include the facility's contributions to teacher education, family support, institutional responsiveness, and children's active participation in everyday routines.

Despite these developments, existing quality frameworks remain more fully developed for formal ECEC programs than for university-based child-minding facilities. Studies on ECEC quality commonly focus on preschools, daycare centers, kindergarten classrooms, and early learning programs, where quality indicators are often organized around classroom process quality, curriculum, child outcomes, teacher-child interaction, and family engagement (Burchinal, 2018; OECD, 2021; von Suchodoletz et al., 2023). These frameworks are useful, but they do not fully capture the distinctive ecology of university-based child-minding settings, where children's care and learning occur alongside parental work arrangements, institutional welfare goals, preservice teacher preparation, observation activities, and center-based documentation. University-based ECEC centers have been discussed in relation to teacher education, research, and service functions (Pihanperä et al., 2022), yet quality indicators for university-based child-minding facilities as hybrid care-learning-institutional spaces remain underdeveloped.

A related methodological gap concerns the type of evidence used to assess quality. Parent satisfaction surveys, developmental records, administrative documents, child interviews, and anecdotal records can all provide useful evidence, but each source offers only a partial view. Parent satisfaction may indicate trust, responsiveness, and service value, but it does not directly reveal children's lived experiences. Developmental checklists may show patterns of observed growth, but they do not fully explain how children experience relationships, play, belonging, routines, or safety. Child interviews and anecdotal documentation can provide insight into children's meanings and everyday participation, but they need to be interpreted alongside stakeholder and developmental evidence. Therefore, a more integrated approach is needed to examine how different evidence sources converge, complement one another, or reveal areas for improvement.

Children's voices are particularly important in this assessment. Recent studies have shown that young children can express meaningful views about their experiences, including friendship, play, comfort, fairness, belonging, care, and participation (Burke & Mercieca, 2024; Hayes, 2024; Pascal & Bertram, 2021; Theobald et al., 2025). Including children's perspectives prevents quality assessment from becoming solely adult-centered. In a child-minding facility, children are not only recipients of care; they are active participants in routines, relationships, play, movement, creativity, and learning. Their accounts can therefore reveal forms of quality that may not be visible in satisfaction ratings or checklist scores alone.

This study addresses these conceptual and methodological gaps by examining the Little Iggy Center, a university-based child-minding facility located within the School of Education at Xavier University – Ateneo de Cagayan. The center provides children of university employees with opportunities for care routines, play-based learning, peer interaction, adult guidance, and developmental participation. It also supports teacher education functions through observation, demonstration teaching, and student engagement. A previous evaluation of Little Iggy Center documented positive stakeholder satisfaction and developmental outcomes (Quileste et al., 2025). However, that earlier work did not develop a framework of quality indicators for university-based child-minding facilities. The present study extends that work by using the Little Iggy Center as an empirical case for developing an evidence-informed framework.

Specifically, this study uses a records-based convergent mixed-methods design to integrate stakeholder satisfaction surveys, developmental checklist records, child interview records, and an event-based anecdotal record. Rather than imposing predetermined indicators, the study examines how evidence from adult stakeholders, developmental documentation, and children's lived experiences intersect in describing quality. Through this integration, the study aims to identify quality indicators that are responsive to the hybrid nature of university-based child-minding facilities.

The novelty of this study lies in the development of a context-sensitive framework of quality indicators for university-based child-minding facilities. Unlike general ECEC quality models that primarily emphasize classroom quality, formal care provision, or child outcomes, the proposed framework integrates safe and responsive care, play-rich engagement, developmental support, relational belonging, child voice, family communication, teacher education usefulness, reflective documentation, and inclusive support. In doing so, the study contributes to ECEC quality scholarship by extending quality assessment to a less-examined setting in which care, learning, family support, teacher education, and institutional service operate together.

The following research questions guided this study:

1. What do stakeholder satisfaction data from parent-clients, School of Education students, and instructors reveal about the perceived quality of Little Iggy Center?
2. What developmental patterns are evident in children’s beginning-of-term and end-of-term checklist records?
3. What themes emerge from child interviews and anecdotal records regarding care, play, relationships, participation, development, and belonging in Little Iggy Center?
4. How do the quantitative and qualitative findings converge, complement one another, or diverge in describing the quality of Little Iggy Center?
5. What quality indicators framework may be proposed for university-based child-minding facilities based on the integrated findings?

Theoretical and Conceptual Framework

For a university-based child-minding facility, the definition of quality implies contextual, multifaceted, and relational characteristics. This study excludes the possibility of applying an unambiguous, prescriptive definition of quality that can be transferred across early childhood care settings such as preschools, daycare centers, and laboratory schools. A university-based child-minding facility serves as a caregiver, a family helper, and an institution contributing to teacher education programs (through observation, demonstration lessons, etc.). Quality assessment should include multiple perspectives, such as caregiving, child participation, development, family trust, institutional, and children's everyday experiences.

In accordance with the first approach, the study relied on the ecological theory of child development. According to the ecological perspective, children develop through the interplay of relations, routines, institutions, and expectations. Thus, the children of Little Iggy Center interact with teachers, teacher aides, other children, materials, and various activities. At the same time, family needs, institutional policies, parents' work schedules, the School of Education's functions, and other factors influence their lives. This perspective rules out the possibility of analyzing a university-based child-minding facility in terms of its resemblance to

classrooms or other childcare facilities. Rather, it locates Little Iggy Center in the university-linked ecology of care and learning.

The second conceptual framework applied concerns the child voice and draws on the sociology of childhood. This theoretical tradition encourages challenging the adult-dominated evaluation paradigm, in which children are seen as the subjects of adult services. Instead, children should be understood as participants who have their own voices, interests, preferences, and experiences. Numerous studies confirm that young children can express their opinions regarding friendship, comfort, fairness, playtime, companionability, and belonging (Hayes, 2024; Pascal & Bertram, 2021). As a result, the responses of the interviewed children are not viewed merely as decoration. On the contrary, their experiences are regarded as an essential source of knowledge for assessing quality at a university-based child-minding facility. Without including the children's perspective, the concept of child-minding quality will remain incomplete. Children's participation in this study is also understood through the idea of agency. In early childhood settings, agency does not refer only to children's ability to make major decisions; it also appears in everyday acts of choosing, expressing preferences, joining routines, seeking help, interacting with peers, and responding to environmental opportunities. This view is important because children's experiences in Little Iggy Center were not treated as passive responses to adult-designed services, but as active expressions of participation within a care-learning setting (Sirkko et al., 2019).

Finally, this study uses the notion of process quality. The structural characteristics (such as facilities, compliance, personnel, schedule, etc.) are not negligible, but they fail to capture the nature of children's experiences. Process quality emphasizes aspects of children's everyday lives, including how they interact with adults and peers; the extent to which they receive adult care, support, and responsiveness; the opportunities for meaningful play and participation; and the level of emotional comfort. This perspective is justified because the quality of care, routines, independence, emotional well-being, and relationships in a child-minding facility are the core issues (Allen et al., 2025; Waters-Davies et al., 2023).

Taken together, the above approaches promote a critical attitude toward quality, defined as ecological, child-centric, and process-based. Furthermore, they justify a mixed-methods approach. Because quality is multi-dimensional, a single type of evidence cannot provide an adequate description of the phenomenon. The data generated during parent-client, student-user, and instructor-user satisfaction surveys reflect the perceptions of quality service, responsiveness, communication, coordination, and educational benefits. Developmental checklists provide information about child development and participation. Anecdotal interviews with children document children's experiences related to care, routines, play, relationships, learning, and participation. All sources of evidence are equally valuable, yet partial.

From a conceptual standpoint, this study integrates these three types of evidence – stakeholder satisfaction surveys, developmental indicators, and children's experiences. Convergence means obtaining support for one quality indicator from all three evidence sources. Complementarity implies enhancing one perspective by drawing on another. Finally, divergence reflects tensions in the evidence obtained. By combining convergent, complementary, and divergent indicators, the study generates quality indicators. For instance, relational care might be demonstrated by parent-clients' satisfaction, anecdotal records of teacher responsiveness, and interviews with children who ask for help. The richness of the play might be validated by stakeholders' perspectives, documented growth in children's arts and physical activities, and children's stories about drawing, dancing, storytelling, songs, games, and play (Keung & Fung, 2019; McCormick, 2018). Figure 1 presents the conceptual framework of the study.

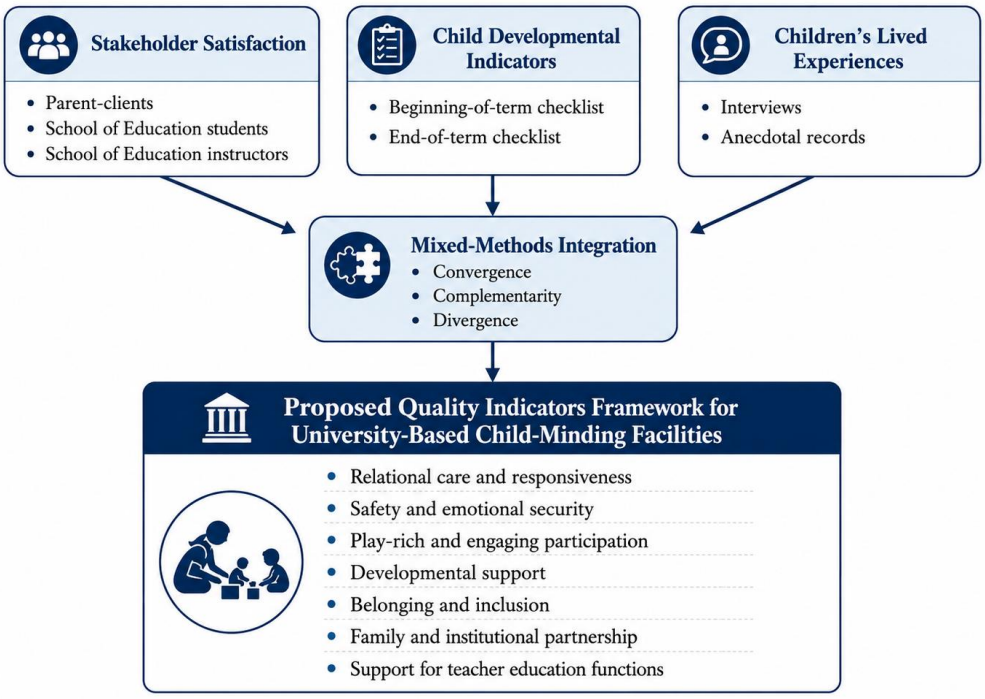

Figure 1. Conceptual framework for developing quality indicators in a university-based child-minding facility

From this perspective, Little Iggy Center is both an object of analysis and the empirical foundation of the more general theory of quality indicators. While an evaluative study focused on the quality of a particular facility, the project can help develop a framework for defining quality indicators for university-based childcare. Figure 1 demonstrates how stakeholder satisfaction surveys, child developmental indicators, and children's experiences converge, complement, and diverge to generate quality indicators.

METHODOLOGY

Research Design

A records-based convergent mixed-methods design was used to develop an evidence-informed framework of quality indicators for university-based child-minding facilities. This design was relevant to this study because the concept of quality was multidimensional and could not be comprehensively explored with a single type of evidence. The quantitative strand investigated stakeholder satisfaction survey responses and developmental checklist records of children. The qualitative strand investigated records of child interviews and an event-based anecdotal record.

Both strands of data were analyzed separately. However, during the interpretative stage, they were integrated to assess whether the study's evidence sources converged, complemented each other, or diverged in their depictions of quality at Little Iggy Center. Thus, the study went beyond a mere program evaluation and used routinely collected center-based evidence to build an applicable framework of quality indicators for university-based child-minding centers.

Research Setting

The study was conducted at Little Iggy Center, a university-based child-minding facility attached to the School of Education of Xavier University – Ateneo de Cagayan. The center provided children of university employees with care routines, play, peer interaction, teacher-guided learning experiences, and opportunities for development. Moreover, Little Iggy Center offered various functions to university-based teacher education programs, including observation and demonstration teaching. Thus, the dual nature of Little Iggy Center

made it well-suited to exploring quality in the context of a university-based child-minding facility. On the one hand, it operated as a care environment; on the other, it served as a learning center associated with the school's programs and interests.

Researcher Positionality

The researcher's interest in the study emerged from professional and institutional engagement with Little Iggy Center and from a commitment to child-centered inquiry in early childhood education. This connection required reflexive attention because it could have encouraged an overly favorable or administrative reading of the center. To reduce this risk, the study treated quality as an empirical question rather than as a predetermined strength. The researcher also treated each evidence source as meaningful but partial. Satisfaction ratings reflected stakeholder perceptions, developmental checklists reflected structured judgments of observed growth, and child interviews and anecdotal records reflected situated forms of child expression and teacher documentation. Mixed-methods integration was used to develop a more balanced account of quality.

Participants and Data Sources

Routine assessment, documentation, and feedback records of Little Iggy Center were utilized throughout two documentation cycles. They were classified into three major evidence domains: stakeholder satisfaction, developmental indicators of children, and children's lived experiences.

Stakeholder satisfaction was investigated through surveys completed by parent-clients, School of Education students who used the center for demonstration teaching or observation, and instructors who used the center for observation, demonstration teaching, or other purposes. Specifically, parent-clients were identified as the key family members who received services from the center. In contrast, student-users and instructor-users were selected based on the secondary role that Little Iggy Center plays within the School of Education's teacher education programs. Developmental indicators of children were investigated using beginning- and end-of-term developmental checklist records. Only children with complete beginning- and end-of-term developmental records within a single documentation cycle were included in descriptive comparisons. Other records available at a single point in time were kept for supplementary descriptive purposes. Children's lived experiences were examined through child interview records and one event-based anecdotal record. Child interviews provided direct evidence of children's experiences at Little Iggy Center. The event-based anecdotal record contained a detailed account of an important event in children's experience, including children's participation, emotions, the teacher's actions, safety management, parent-child communication, and the teacher's reflection.

Overall, 26 stakeholders' surveys were used to analyze stakeholder satisfaction data: 11 parent-client responses, 12 student-user responses, and 3 instructor-user responses. There were also 25 developmental checklist records, including 11 paired beginning- and end-term records and 3 separate end-term records. As for qualitative data, there were 11 child interviews from 8 children and 1 anecdotal record.

Data Gathering Procedure

Little Iggy Center records, generated through the center's ongoing documentation and assessment processes, were used in this manuscript. Thus, they did not exist solely for this study and were part of an established system for monitoring, documenting, providing feedback, conducting research, and continuous improvement at Little Iggy Center. In particular, the Little Iggy Center teacher and teacher aide were involved in administering, organizing, and safely keeping the records. Parents who used the center's services were provided with information about the center's documentation and assessment practices during the opening or orientation period before regular activities began. Related forms were also available via the center's website. Parents were asked to review and sign consent forms indicating their willingness to share records and responses with the researcher.

As for the quantitative strand of data, stakeholder satisfaction survey responses and child developmental checklist records were compiled, reviewed, and encoded for analysis. Specifically, parent-client surveys were completed by parents who used the Little Iggy Center's services. Student and instructor surveys were completed exclusively by School of Education user groups that reserve the center for observation, teaching demonstrations, and related activities. For paired analysis, the same child's records from the beginning and end of a single documentation cycle were selected for examination. Unpaired records were kept and analyzed only on a descriptive level. As for qualitative data, child interview responses and event-based anecdotal records were compiled, anonymized, and prepared for thematic analysis. Child interviews were used as the primary qualitative data to capture children's perspectives on their experiences at Little Iggy Center. Anecdotal records were used as supplementary event-based qualitative data. Missing anecdotal records per one term were not considered missing routine data since anecdotes were event-based documents.

Instruments, Validation, Reliability, and Trustworthiness

Four center-based instruments were used in this study: stakeholder satisfaction surveys, developmental checklist records, child interview guides, and an event-based anecdotal record form. These instruments formed part of Little Iggy Center's routine documentation, assessment, and feedback system. They underwent expert review and pilot-based refinement before being used in the documentation cycles analyzed in this study.

The stakeholder satisfaction surveys captured the perceptions of parent-clients, School of Education student-users, and instructor-users regarding Little Iggy Center. Although the wording of the items varied by stakeholder group, the surveys generally covered service quality, accessibility, supportiveness, communication, coordination, facilities, preparedness, educational usefulness, and overall satisfaction. The surveys also included open-ended questions about center strengths, areas for improvement, and suggestions. Prior pilot testing showed very high internal consistency, with a Cronbach's alpha of .90. Content validity was supported by an S-CVI/Ave of .90 based on the review of three early childhood professionals.

The Little Iggy Center Learning Checklist documented children's development and participation across comparable domains, including language and literacy, physical well-being and motor development, social-emotional development, science, mathematics, arts, social studies, and self-help skills. For scored domains, indicators were coded as observed or not observed, and each domain score was calculated as the number of observed indicators. Self-help evidence was treated descriptively because scoring varied across individual records. Prior validation showed satisfactory inter-rater reliability (Cohen's kappa = .80) and adequate content validity (S-CVI/Ave = .80) based on review by early childhood professionals.

The child interview guides were used to gather children's perspectives on life at the center, including care, play, relationships, routines, feelings, safety, movement, creativity, participation, and learning. The event-based anecdotal record form was used as supplementary evidence to document significant events, teacher responses, safety interventions, parent-child communication, and reflective practice. Three early childhood specialists reviewed the qualitative instruments through a three-round Delphi process. The final S-CVI/Ave of .90 indicated strong expert agreement regarding the relevance and appropriateness of the tools. The use of child-friendly interview guides was important because interviews with young children require conditions that support comfort, expression, and participation. In this study, the interview records were treated as developmentally situated accounts rather than adult-like explanations. This approach recognizes that young children's participation in interviews may be encouraged or limited by the clarity of questions, the relational atmosphere, and the extent to which children feel safe to express their experiences (Ponizovsky-Bergelson et al., 2019).

The trustworthiness of the qualitative analysis was supported by credibility, dependability, confirmability, and transferability. Credibility was strengthened by grounding interpretation in child interview records and using anecdotal documentation to contextualize the findings. Dependability was supported through repeated reading, coding, theme development, and refinement. Confirmability was

addressed by maintaining a distinction between children's own statements and adult-authored documentation. Transferability was supported by describing the setting, data sources, and institutional character of Little Iggy Center. Member checking with child participants was not conducted because it was not developmentally appropriate for the children's age range; instead, the emerging themes were reviewed with the Little Iggy Center teacher, who was familiar with the children's everyday participation in the center. These strategies were used to make the qualitative component more transparent and defensible, particularly because credibility and trustworthiness in qualitative evaluation depend on clear documentation of data sources, analytic procedures, and the relationship between evidence and interpretation (Liao & Hitchcock, 2018).

Quantitative Data Analysis

Quantitative data were analyzed descriptively since they were derived from small, naturally occurring groups. Specifically, stakeholder satisfaction data were analyzed by calculating frequencies, percentages, means, and standard deviations for each survey item, depending on the response format. Moreover, the open-ended survey responses were reviewed to understand stakeholder perceptions, the strengths of the Little Iggy Center, areas for improvement, and feedback on its usefulness. Developmental checklist data were analyzed by examining domain scores calculated from the number of observed indicators. Paired analysis of beginning- and end-term records helped establish whether there was progress, stability, or regression in children's development. Unpaired data provided only descriptive insights into children's development. Overall, the findings regarding children's development should be taken as documented developmental patterns rather than as evidence that the center caused these developments.

Qualitative Data Analysis

Qualitative data in the form of children's interviews and an anecdotal record were analyzed using thematic analysis. This approach enabled researchers to identify recurring themes of meaning in child interview records and an anecdotal record in a child-centered and context-aware way. Following Braun and Clarke (2023), thematic analysis involved recursive exploration of data, coding, and theme development. First, interview records and the anecdotal record were read repeatedly to identify themes. Then, meaning units in records were labeled using keywords and phrases reflecting care, play, relationships, participation, belonging, independence, routines, movement, expression, safety, and development. Themes were reviewed, clustered, and refined in relation to the entire set of qualitative data. Child interviews were treated as primary qualitative data, with anecdotal documentation used to deepen interpretation.

Mixed-Methods Integration

The integration of the findings obtained followed quantitative and qualitative data analyses. Specifically, integration involved comparing and interpreting evidence from stakeholder satisfaction, developmental indicators, and children's experiences. This process helped reveal whether findings within evidence domains converged, complemented each other, diverged, or revealed different emphases.

To integrate the evidence, a joint display was used. The use of a joint display strengthened the integration process by enabling structured comparison of evidence across quantitative and qualitative strands. Rather than presenting survey results, checklist patterns, interview themes, and anecdotal documentation as separate findings, the joint display allowed the study to generate meta-inferences about quality by examining how different evidence sources supported, extended, complicated, or remained silent about each emerging quality dimension (Fetters & Tajima, 2022). This technique enabled the identification of convergence, complementarity, divergence, and silence/absence across three major evidence domains (stakeholder satisfaction, child development, and children's experiences). Namely, emerging quality dimensions were compared with data coming from parent-client satisfaction, student-user satisfaction, instructor-user satisfaction, developmental checklist records, child interview themes, and anecdotal documentation. When more than one source supported a quality dimension, it was considered convergent evidence. When one

source complemented another, a complementation relationship was observed. If the sources presented divergent data or indicated areas for improvement, a divergence existed. Silence or absence occurred when one strand revealed quality dimensions not evident in the other data.

This process helped generate meta-inferences and develop the quality indicator framework. Specifically, the quality indicators were derived from interactions among the study's evidence domains. In other words, this study did not impose quality indicators from outside but developed them from interactions within the data.

Ethical Considerations

Throughout this study, ethical considerations were upheld regarding all records used in the manuscript. Prior to participating in any activity at Little Iggy Center, children's parents were informed about the center's documentation and assessment practices, including surveys, child interviews, anecdotal documentation, and developmental assessments. Information was conveyed during the opening/orientation period at Little Iggy Center and was supported by consent- and assent-related documents available on the center's website. These procedures were especially important because the study involved records related to young children. Ethical research with children requires attention not only to parental consent but also to children's comfort, assent, privacy, and right not to participate in ways that may make them uncomfortable. Current discussions on research with young children emphasize that children should be treated as participants whose dignity, preferences, and expressions must be respected throughout data generation and interpretation (Mirabella et al., 2025; Montreuil et al., 2021; Sun et al., 2023). Records collected during the documentation process served the purpose of Little Iggy Center's reporting, feedback, and research, all aimed at improving the center's work with children and families. For the manuscript, they were collected, handled, and analyzed in accordance with the Institutional Research Ethics Board guidelines of Xavier University – Ateneo de Cagayan. Throughout the research process, the dignity, privacy, and confidentiality of children, families, and stakeholders involved in the study were respected. First, identifying information was stripped from all manuscript material. Second, individuals were referred to using anonymized participant codes. Third, raw files were managed responsibly and were accessible only for this research project. Fourth, children's comfort and assent were respected during interviews, and they were not expected to answer questions that made them feel uncomfortable.

FINDINGS

Stakeholder Satisfaction with Little Iggy Center

Positive stakeholder satisfaction was observed among parent-clients, School of Education student-users, and instructor-users of Little Iggy Center. As seen in Table 1 below, the overall mean for stakeholder rating items was relatively high (M = 4.64, SD = 0.67), and 94.03% of item responses were positive. Parent-clients rated the center the highest (M = 4.89, SD = 0.36), followed by student-users (M = 4.69, SD = 0.52). Instructor users rated the center much lower (M = 3.85, SD = 0.86), yet they maintained mostly positive impressions. Hence, the center was generally viewed as a valuable care and learning environment, although its academic use remained less developed for instructors compared to parent-clients and student-users.

Table 1. Summary of Stakeholder Satisfaction tings

Stakeholder Group	n	Number of Rating Items	Overall Mean	SD	Positive Responses (%)
Parent-clients	11	6	4.89	0.36	98.48
School of Education student-users	12	9	4.69	0.52	97.22
Instructor-users	3	9	3.85	0.86	70.37
Overall	26	—	4.64	0.67	94.03

As seen in Table 2 below, parent-clients reported very high levels of satisfaction in multiple aspects, including center care (M = 4.85, SD = 0.65), communication (M = 4.97, SD = 0.33), safety (M = 5.00, SD = 0.00), and arrangement of services (M = 4.94, SD = 0.23). Other highly-rated elements of Little Iggy Center include schedule flexibility (M = 4.94, SD = 0.29), staff professionalism (M = 5.00, SD = 0.00), and management communication (M = 4.85, SD = 0.56). Curriculum appropriateness received the lowest parent-client mean (M = 4.73, SD = 0.65) among the rated aspects, yet it remained within the positive range. Parents also provided open-ended statements about what they appreciated. For example, they mentioned good teachers, the center's convenience, their children's socialization, and the learning/play environment. Some parents commented that their children were happy to go to the center and learned a lot about their teachers, classmates, and various activities. However, some areas needed improvement, including better bathrooms, facility maintenance, interactive activities, social interaction tasks, full-day services, and even expanding center services to another campus or area.

Table 2. Parent-Client Satisfaction by Indicator

Indicator	Mean	SD	Positive Responses (%)
The facility is clean and safe.	4.82	0.40	100.00
The schedule is flexible and readily available.	4.91	0.30	100.00
The staff are qualified and demonstrate professionalism.	5.00	0.00	100.00
The management established clear communication and responsiveness.	4.91	0.30	100.00
The curriculum is provided and appropriate for the children.	4.73	0.65	90.91
The information on fees and payment options is provided.	5.00	0.00	100.00

The results of the School of Education student-user survey, presented in Table 4, also show quite positive ratings for the center. According to Table 3, feedback quality and professional development contribution had identical means of 4.92 (SD = 0.29), which equals 100% positive responses. Such positive results indicate that students viewed the Little Iggy Center not only as a place where their children stayed but also as a significant learning experience for professional development. The lowest rating aspect among student-users was preparation support (M = 4.42, SD = 0.51). However, all student ratings were also positive. The student interviews provided further clarification of these survey results, suggesting that students viewed the center as a welcoming and supportive environment that allowed them to apply different theories and build confidence. In particular, several students requested more opportunities to conduct demonstrations at the center, indicating the further potential for the center's learning function.

Table 3. School of Education Student-User Satisfaction by Indicator

Indicator	Mean	SD	Positive Responses (%)
Ease of scheduling	4.50	0.67	91.67
Facility access	4.67	0.65	91.67
Observation support	4.83	0.39	100.00
Learning experience	4.58	0.51	100.00
Preparation support	4.42	0.51	100.00
Teaching aids	4.58	0.67	91.67
Feedback quality	4.92	0.29	100.00
Professional development	4.92	0.29	100.00
Overall experience	4.75	0.45	100.00

As seen in Table 4 below, the highest-rated item among instructor-users was resource availability (M = 4.67, SD = 0.58), while the lowest-rated aspect was curriculum integration (M = 3.33, SD = 1.53). Overall, these

findings reflect instructors' positive perceptions of Little Iggy Center's potential but also suggest room for improvement in curricular areas, including routines, writing materials, and the publication of the center-school calendar.

Table 4. Instructor-User Satisfaction by Indicator

Indicator	Mean	SD	Positive Responses (%)
Student readiness	4.00	0.00	100.00
Curriculum integration	3.33	1.53	33.33
Observation skills	3.67	0.58	66.67
Teaching demonstration effectiveness	3.67	0.58	66.67
Skill development	4.00	1.00	66.67
Feedback mechanism	3.67	0.58	66.67
Resource availability	4.67	0.58	100.00
Facility environment	4.00	1.00	66.67
Educational benefit	3.67	1.53	66.67

Summing up the findings of the current study, one may conclude that the Little Iggy Center was considered quite positively by the stakeholders. Parent-clients valued it as a reliable care facility, while student-users focused on its learning potential. Instructor-users also viewed the center quite positively, but needed certain adjustments in its use.

Developmental Patterns in Children's Beginning- and End-Term Checklist Records

The results of the checklist assessment indicate positive developmental patterns in the paired children. Because of the descriptive nature of the data obtained and the small number of children, no inferential analyses were performed on the checklists. As shown in Table 5, the overall average score across seven comparable 0-5 categories increased from 2.39 (SD = 1.22) to 4.12 (SD = 1.37), with an overall average gain of 1.73. All domains saw positive changes, and none witnessed a negative average score change.

The largest average gains in this group of domains included math (gain = 2.27), social studies (gain = 2.18), arts (gain = 2.00), language and literacy (gain = 1.73), and science (gain = 1.64). Although physical and motor, as well as social-emotional domains, showed positive changes too, their gains were smaller because the children already demonstrated quite high scores before (at the beginning of the term). As Table 6 demonstrates, the highest scores (ending average) were found in the physical and motor domain (4.82), language and literacy (4.64), social-emotional development (4.27), and arts (4.27). From this perspective, children were actively engaged in moving around, communicating, interacting with others, and participating in arts projects.

Table 5. Developmental Checklist Scores Across Paired Beginning- and End-Term Records

Domain	Beginning Mean	Beginning SD	End Mean	End SD	Mean Gain	Increased Cases	Stable Cases	Decreased Cases
Language and Literacy	2.91	1.22	4.64	0.67	1.73	7	4	0
Physical/ Motor	3.73	1.01	4.82	0.60	1.09	6	5	0
Social-Emotional	3.09	0.83	4.27	1.10	1.18	7	4	0
Science	1.82	0.40	3.45	1.81	1.64	6	5	0
Math	1.18	0.60	3.45	1.86	2.27	7	4	0
Arts	2.27	0.90	4.27	1.10	2.00	9	2	0
Social Studies	1.73	1.19	3.91	1.51	2.18	6	5	0
Overall	2.39	1.22	4.12	1.37	1.73	—	—	—

At the same time, one should note that not all children experienced equal gains across all domains, and some showed stable scores, which does not mean stagnation in their development. It only means that they already reached quite a high level in these domains. Hence, these domains would not be expected to show substantial gains. The checklist self-help domain was excluded from statistical analysis due to its non-standard scoring across individual records. However, it was obvious that children developed independently in many ways, including asking for help, washing hands, eating, dressing, and cleaning up.

Children's Lived Experiences of Care, Play, Relationships, Participation, Development, and Belonging

Child interviews showed that Little Iggy Center was an important part of children's lives in terms of care, learning, play, friendships, and social interaction. As Table 6 and anecdotal record demonstrate, 11 child interviews revealed five main themes – play-rich engagement, relational care and emotional security, peer connection and belonging, developing independence through routines, and emergent learning through daily activity. Play-rich engagement theme was evident in children's references to play rooms, toys, sports, dancing, singing, drawing, and colors, which clearly indicated that play served as a key factor of children's engagement and enjoyment at Little Iggy Center.

Another theme emerging from children's responses was relational care and emotional security because some children explicitly described asking for help, getting hugs from parents and teachers, and experiencing emotional states such as happiness and sadness. The anecdotal record supported this finding as well because it showed how teachers reacted to one child's emotional disengagement. In addition to supporting the child emotionally and using drawing for calming, the teacher checked safety, communicated with the parent, and reflected upon future actions regarding this situation.

Peer connection and belonging theme emerged because some children reported sharing toys, greeting friends, engaging in pretend play, checking up on others, and even helping their friends. Hence, Little Iggy Center provided children with necessary conditions for practicing social interactions, belonging to the center, and interacting with peers on a regular basis.

Developing independence through routines theme appeared quite prominently in children's responses, especially in relation to the following activities: eating, hygiene practices, toilet activities, cleaning up, dressing, and asking for help. These responses show that children were encouraged to develop independence in various domains through routines, and not necessarily as a result of intentional instruction.

Emergent learning through daily activities theme revealed that children were actively engaged in various learning processes at Little Iggy Center. They learned through listening to stories, singing counting rhymes, exploring various objects in science class, and playing different games, such as those related to their families or communities.

Table 6. Themes from Child Interviews and Anecdotal Documentation

Theme	Evidence Pattern	Illustrative Indicators from the Records	Meaning for Quality
Play-rich engagement	Children repeatedly described play, movement, drawing, coloring, dancing, songs, sports, toys, and playroom activities.	Drawing, coloring, dancing, basketball, soccer, playroom, toys, stories, art materials, songs	Quality was experienced through active, enjoyable, and developmentally meaningful participation.
Relational care and emotional security	Children described teachers, parents, comfort strategies, gentle hands, asking for help, hugging, and emotional expression.	"Gentle hands," asking teacher, hugging parents, telling adults when sad or happy, calming through familiar activities	Quality included emotional support, adult responsiveness, and children's ability to seek help.
Peer connection and belonging	Children mentioned friends, sharing toys or food, greeting peers, playing	Sharing toys, saying "Hi friend," playing with	Quality was reflected in social participation,

Theme	Evidence Pattern	Illustrative Indicators from the Records	Meaning for Quality
	together, and checking on others.	classmates, asking "Are you okay?", sharing food	friendship, kindness, and inclusion.
Developing independence through routines	Children described bathing, brushing teeth, eating, washing hands, using the bathroom, cleaning up, buttoning, zipping, and helping at home or school.	Eating independently, cleaning after snack time, washing hands, using the toilet, dressing, chores	Quality included support for self-help, responsibility, and everyday independence.
Emergent learning through daily activity	Children described stories, counting, shapes, colors, science materials, family, community, and simple investigations.	Retelling stories, counting, identifying shapes, naming colors, using baking soda and vinegar, observing trees and leaves	Quality included learning opportunities embedded in play, routines, and child-centered activities.

Convergence, Complementarity, and Divergence Across Quantitative and Qualitative Findings

As shown in Table 7 below, the integration of findings from surveys, checklists, interviews, and the anecdotal record demonstrated convergence in several aspects (safe and responsive care, play-rich engagement, developmental support, peer connection and belonging, child participation, and family trust) as well as divergence in others (facility maintenance, routine visibility, learning resources, academic coordination, and transition safety). Complementarity between the results of various types of data collection was evident as well. First of all, surveys provided stakeholders' perspective on the center quality, and interviews showed children's experience of the center's qualities. In turn, the results of the developmental checklists described developmental gains among children in various domains, and interviews and anecdotal record offered detailed explanations of how such gains were achieved through routines, relationships, and interactions.

Table 7. Joint Display of Mixed-Methods Integration

Emerging Quality Dimension	Stakeholder Satisfaction Evidence	Developmental Checklist Evidence	Child Interview and Anecdotal Evidence	Integration Result
Safe, responsive, and trusted care	Parent-client ratings were very high for staff professionalism, communication, safety, and service quality.	Checklist remarks documented safety routines, adult guidance, healthy habits, and child support.	Children described asking adults for help, using gentle hands, and expressing needs; the anecdotal record showed responsive teacher action and parent communication.	Convergence
Play-rich and engaging participation	Parents and students described the center as a positive and meaningful environment for children and student learning.	Gains appeared in arts, physical/motor development, language, and social participation.	Children described drawing, coloring, dancing, songs, toys, sports, stories, and playroom activities.	Convergence
Developmental support across domains	Parent and student ratings supported the center's value for	Paired checklist scores increased from M = 2.39 to M = 4.12 across	Children described counting, shapes, stories, science activities, hygiene	Convergence

Emerging Quality Dimension	Stakeholder Satisfaction Evidence	Developmental Checklist Evidence	Child Interview and Anecdotal Evidence	Integration Result
	learning and child development.	seven common domains.	routines, and self-help practices.	
Peer connection and belonging	Parent comments noted children's socialization and positive experiences with classmates and teachers.	Checklist records documented cooperation, sharing, helping, turn-taking, and social-emotional development.	Children described friends, sharing toys or food, greeting peers, and playing with others.	Convergence
Institutional and teacher education value	Student-users rated feedback quality and professional development highly; instructors recognized educational benefit but with more moderate ratings.	Checklist records provided authentic documentation for understanding child development.	The center offered real child-centered contexts for observation and demonstration.	Complement arity with areas for improvement
Program improvement needs	Parents suggested facility maintenance, more interactive activities, expanded options, and full-day services; instructors suggested stronger routines, resources, and calendar publication.	Some domains remained lower or stable depending on baseline levels and available observations.	The anecdotal record highlighted transition supervision, emotional support, and safety monitoring as improvement areas.	Divergence and improvement emphasis

Proposed Quality Indicators for University-Based Child-Minding Facilities

Overall, based on the results obtained in the previous sections, one can propose certain quality indicators for university-based child-minding facilities. As Table 8 demonstrates, nine proposed indicators include safe and responsive care, play-rich engagement, developmental support in all domains, relational belonging and peer connections, child participation and voice, family trust and communication, teacher education value and institutional usefulness, reflective documentation and continuous improvement, and inclusive and adaptive support. These quality indicators were selected based on the convergence, divergence, and complementarity of findings discussed earlier in the Results section.

Table 8. Proposed Quality Indicators for University-Based Child-Minding Facilities

Proposed Quality Indicator	Description	Supporting Evidence
Safe and responsive care	Provides safe, supervised, and emotionally supportive care.	High parent ratings on safety, professionalism, and communication; anecdotal evidence of teacher response and parent communication
Play-rich engagement	Supports participation through play, movement, stories, art, music, and sports.	Child interviews on play, drawing, dancing, songs, sports, and toys; gains in arts and physical/motor development

Proposed Quality Indicator	Description	Supporting Evidence
Developmental support across domains	Supports language, motor, social-emotional, cognitive, creative, and routine-based growth.	Checklist gains from M = 2.39 to M = 4.12; interview evidence on stories, counting, shapes, science, and self-help
Relational belonging and peer connection	Builds friendship, sharing, turn-taking, helping, and inclusion.	Interview evidence on friends, greetings, sharing, and peer play; checklist evidence of cooperation and helping
Child voice and participation	Treats children's experiences, preferences, and feelings as evidence of quality.	Interviews on favorite activities, routines, emotions, relationships, and learning
Family trust and communication	Maintains parent confidence through care, responsiveness, and communication.	High parent ratings; comments on teachers, responsiveness, socialization, and children's excitement
Teacher education and institutional usefulness	Supports observation, demonstration, feedback, and authentic engagement with children.	Student ratings on feedback and professional development; instructor feedback on educational value and resources
Reflective documentation and improvement	Uses multiple records to monitor quality and identify needs.	Surveys, checklists, interviews, anecdotal records, and comments on facilities, routines, resources, and coordination
Inclusive and adaptive support	Responds to children's needs through guidance, routines, calming strategies, and individualized support.	Checklist remarks and anecdotal evidence of adapted guidance, emotional support, redirection, and reflection

Figure 2 represents an illustration of these nine proposed quality indicators in four domains, which show that they are interrelated. The first domain, namely, child-centered care and participation, reflects two key aspects of quality (safe and responsive care and child participation/voice). The second domain, developmental and inclusive support, covers three aspects, namely, developmental support in all domains, relational belonging, and inclusive/adaptive support. Family and institutional partnership domain incorporates two indicators, namely, teacher education value/institutional usefulness and family trust/communication. Finally, the fourth domain (reflective documentation and continuous improvement) refers to two indicators – documentation and continuous improvement.

Figure 2. Proposed Quality Indicators Framework for University Child-Minding Facilities

DISCUSSION

The findings of this study suggest that quality in a university-based child-minding facility is best understood as a multidimensional and context-sensitive construct rather than as a single service outcome. While stakeholder satisfaction ratings, developmental checklist records, child interviews, and anecdotal documentation each provided useful evidence, none of these sources alone was sufficient to define quality. The integrated findings showed that quality in Little Iggy Center was shaped by safe and responsive care, play-rich engagement, developmental support, relational belonging, child voice, family communication, teacher education usefulness, reflective documentation, and inclusive support. This supports the view that early childhood quality should be understood through both structural and process dimensions, including the conditions of care as well as the everyday interactions and experiences that children encounter in the setting (Burchinal, 2018; OECD, 2021).

The study extends existing discussions of process quality by situating quality within the specific ecology of a university-based child-minding facility. In general ECEC literature, process quality is often associated with children's interactions with adults, peers, materials, routines, and learning opportunities (Ha et al., 2025; OECD, 2021). These dimensions were also evident in Little Iggy Center, particularly through children's accounts of play, movement, stories, art, peer interaction, asking for help, and participation in routines. However, the university-based nature of the center added another layer to quality. The center did not function only as a childcare site; it also served employee families, supported institutional welfare, and provided authentic contexts for preservice teacher observation and demonstration teaching. This finding is consistent with literature showing that university-based ECEC centers may carry educational, research, outreach, and teacher preparation functions (Pihanperä et al., 2022). Therefore, quality in this setting must be interpreted not only in relation to children's experiences, but also in relation to family support and teacher education usefulness.

Compared with broader ECEC quality models, the proposed framework differs in its attention to the hybrid care-learning-institutional character of child-minding facilities. Existing quality assessment approaches have contributed important tools for examining structural quality, process quality, classroom interaction, and child outcomes (Burchinal, 2018; Ishimine & Tayler, 2014; von Suchodoletz et al., 2023). Recent framework-building studies have also identified multidimensional quality categories such as care, play, learning, friendship, communication, and participation (Baustad et al., 2025; Sağlam et al., 2023). The present framework shares these concerns but extends them by adding indicators that are especially relevant to university-based child-minding facilities: family trust and communication, teacher education and institutional usefulness, reflective documentation and improvement, and inclusive/adaptive support. These indicators are important because university-based child-minding centers are not always organized as full formal classrooms, yet they still carry developmental, relational, educational, and institutional responsibilities.

The inclusion of child voice also strengthened the quality framework. Children's accounts also show that relational care is not an abstract quality indicator but a lived experience. Their references to teachers, help-seeking, comfort, gentle hands, and emotional expression suggest that adult responsiveness shaped how they experienced safety and belonging in the center. This supports studies showing that children can describe high-quality early childhood teaching through relational and affective experiences, including comfort, care, and teacher support (Rodríguez-Carrillo et al., 2020). In this sense, relational care becomes visible when children describe how adults make them feel safe, supported, and included. Adult satisfaction data showed that parent-clients, student-users, and instructor-users generally valued the center, but children's interviews revealed how quality was actually experienced in everyday life. Children described quality through play, friends, teachers, favorite activities, help-seeking, movement, stories, art, food, hygiene routines, and feelings. These accounts show that young children can contribute meaningful evidence about what makes a care-learning environment comfortable, enjoyable, relational, and participatory (Hayes, 2024; Pascal & Bertram, 2021; Theobald et al., 2025). Thus, child voice should not be treated as decorative evidence or as a minor qualitative supplement. In

this study, it functioned as a necessary evidence source for identifying quality indicators that would not be fully visible through adult ratings or developmental checklists alone.

The findings also reinforce the importance of play, care, and belonging as quality indicators. Children's repeated references to drawing, coloring, dancing, songs, toys, sports, stories, and playroom activities suggest that play-rich engagement was central to how they experienced the center. This supports prior research showing that children often perceive play as a meaningful context for learning, participation, and enjoyment (Keung & Fung, 2019). Relational care was also evident in children's descriptions of asking teachers for help, using gentle hands, receiving comfort, and interacting with friends. These findings align with research emphasizing care, belonging, peer connection, and responsive adult-child relationships as important dimensions of children's early learning environments (Allen et al., 2025; McCormick, 2018; Waters-Davies et al., 2023).

The developmental checklist findings should be interpreted carefully. The positive gains across several developmental domains suggest that the center provided opportunities for children to demonstrate growth in language, motor, social-emotional, cognitive, creative, and routine-based activities. However, these records should not be read as causal proof that the center alone produced the observed changes. Children's development may also be influenced by age, family support, previous experiences, therapy, learning outside the center, and regular participation in other environments. This cautious interpretation is important because ECEC quality and child outcomes are associated in complex ways and may vary according to child, family, setting, and measurement conditions (von Suchodoletz et al., 2023). In this study, the developmental records are best understood as one strand of evidence that complements stakeholder perceptions and children's lived experiences.

The study's integrated findings further show that improvement needs are part of quality evaluation. Inclusive and adaptive support also emerged as an important quality indicator because children's participation was shaped by guidance, routines, emotional support, and adult responsiveness. In this study, inclusion was not limited to formal placement or access to the center; it was reflected in how children were supported to join activities, interact with peers, follow routines, seek help, and regulate emotions during everyday experiences. This interpretation is consistent with inclusive ECEC literature, which emphasizes participation through children's active engagement in activities, interactions, and routines (Dott & Licandro, 2025). High satisfaction ratings and positive developmental patterns did not eliminate the need to examine divergence and areas for development. Parent comments identified facility maintenance, bathroom upkeep, expanded services, and more interactive activities as possible improvements. Instructor-user ratings suggested that the center's teacher education function would benefit from stronger curricular coordination, clearer routines, activity calendars, and resources. The anecdotal record also highlighted transition safety, emotional support, supervision, and reflective teacher response. These findings are important because quality evaluation should include not only successful experiences but also tensions, absences, and difficult moments that reveal where the setting can improve (Pihlainen et al., 2022).

The proposed framework therefore offers both theoretical and practical contributions. The family and institutional dimensions of the framework further distinguish university-based child-minding quality from generic ECEC quality models. Family trust and communication are important because parents' perceptions of responsiveness, safety, and care influence how they evaluate the usefulness of early childhood services (Otero-Mayer et al., 2026). At the same time, the center's location within a School of Education means that quality also includes its capacity to support preservice teacher learning through observation, demonstration, feedback, and authentic engagement with children. This institutional function is consistent with literature on university laboratory preschool contexts, where early childhood settings may support both child development and teacher education purposes (Monroe & Horm, 2012). Theoretically, it expands quality assessment beyond formal classroom-based ECEC models by showing how quality can be conceptualized in a hybrid university-based child-minding facility. It connects ecological, process-oriented, and child-voice perspectives by showing that children's experiences are shaped by interactions among adults, peers, routines, family needs,

institutional arrangements, and teacher education purposes. Practically, the framework can guide administrators, center staff, teacher educators, and researchers in assessing child-minding facilities through multiple evidence domains rather than through satisfaction ratings or developmental records alone. It also encourages centers to document quality through surveys, checklists, child interviews, anecdotal records, and reflective improvement processes.

The findings have several implications for Little Iggy Center and similar university-based child-minding facilities. First, the center should preserve its strengths in safe and responsive care, play-rich engagement, communication with families, and children's participation. Second, the center should address improvement needs related to facility maintenance, learning materials, activity planning, routine visibility, and transition supervision. Third, the School of Education should strengthen the center's teacher education function by aligning observation and demonstration activities with course outcomes, providing orientation for student-users and instructor-users, and developing a clearer reservation and activity calendar.

The study is bounded by several limitations. It used routinely collected center-based records; thus, sample sizes varied across stakeholder groups and evidence sources. The instructor-user group was small, and anecdotal documentation was event-based rather than continuous. Developmental checklist records also describe observed patterns, not causal effects. Since the study focused on one university-based child-minding facility, the findings are not intended for statistical generalization. However, the detailed description of the setting, evidence sources, and integrated findings may support analytic transferability. Future studies may validate the proposed indicators through expert review, application in other university-based facilities, longitudinal documentation, and comparative research.

CONCLUSION

This study developed an evidence-informed quality indicators framework for university-based child-minding facilities through the mixed-methods analysis of Little Iggy Center. The findings show that quality in this type of setting cannot be defined only by satisfaction ratings, developmental records, or adult observations. Instead, quality emerges from the integration of multiple evidence sources: stakeholder perceptions, children's documented developmental participation, children's own accounts of care and play, and reflective anecdotal documentation. Through this integration, Little Iggy Center was understood as a hybrid care-learning environment shaped by safe and responsive care, play-rich engagement, developmental support, relational belonging, child voice, family trust, teacher education value, reflective documentation, and inclusive support.

The main contribution of the study is the proposed quality indicators framework for university-based child-minding facilities. Unlike general ECEC quality frameworks that are usually designed for preschools, daycare centers, kindergarten classrooms, or formal early learning programs, the proposed framework responds to the distinctive character of university-based child-minding settings. It recognizes that these facilities may serve children and families while also supporting institutional welfare, preservice teacher preparation, observation, demonstration teaching, and continuous program improvement. Its advantage is that it does not rely on a single measure of quality. Instead, it brings together adult stakeholder feedback, developmental evidence, child voice, and event-based documentation to produce a more balanced and context-sensitive assessment of quality.

The framework also offers practical guidance for Little Iggy Center and similar university-based facilities. The center should maintain its strengths in safety, responsiveness, play-rich engagement, family communication, and children's participation. At the same time, it should address improvement areas related to facility maintenance, bathroom upkeep, learning resources, routine visibility, transition supervision, and curricular coordination with teacher education courses. For the School of Education, the findings suggest the need to strengthen the center's instructional function by aligning observations and demonstrations with course outcomes, preparing student-users and instructor-users before center engagement, and developing clearer reservation and activity schedules.

Future research should further validate the proposed indicators through expert review, application in other university-based child-minding or ECEC-related facilities, longitudinal documentation, and comparative studies across institutional contexts. Such work can determine whether the proposed framework is transferable to other settings and whether its indicators can support sustained improvement in child care, family support, teacher education, and institutional service. Overall, the study contributes to ECEC quality scholarship by extending quality assessment to a less examined but important setting where care, learning, family support, and teacher education intersect.

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